01/26/2009 18:52

Image# 29931987785

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Other 1	han An A	Authorize	ed Commit	tee		Office Use	Only	
NAME OF COMMITTEE (in full)	USE FEC MA OR TYPE OR			ample:If typin er the lines	ig, type				
The American Occupational	Therapy Associ	ation, Inc. F	olitical Actio						
		1 1 1							
ADDRESS (number and street)	4720 Monto		e 						
Check if different	PO Box 31:	220 							
than previously reported. (ACC)	Bethesda					L MD	208		220
2. FEC IDENTIFICATION NUM	IBER ¥		CITY 🛕			STATE	ZI	IPCODE .	A
C00089086		3	. IS THIS REPOR	ГХ	NEW (N) OR		AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b) Month Repor	ť 🔲	Feb 20 (M2	2)	May 20 (M5)	A	Aug 20 (M8)	Nov (No Yea	v 20 (M11) on-Election ar Only)
(a) Quarterly Reports:	Due C	On:	Mar 20 (M3	3)	Jun 20 (M6)	S	Sep 20 (M9)	Dec	c 20 (M12) on-Election ar Only)
April 15			Apr 20 (M4)	Jul 20 (M7)		Oct 20 (M10)	χ Jar	1 31 (YE)
Quarterly Report(Q	(c) 1	2-Day PRE -Election		Primary (12	P)	Gener	ral (12G)	Ru	noff (12R)
Quarterly Report(Q October 15 Quarterly Report(Q	F	Report for th		Convention	(12C)	Specia	al (12G)		
January 31 Quarterly Report(Y		E	ection on			• • •		n the State of	
July 31 Mid-Year Report(Non-electio Year Only) (MY)	'' `´ F	0-Day		General (30)G)	Runof	f (30R)	Spi	ecial (30S)
Termination Report (TER)	i F	Report for th	e: ection on			• • •		n the State of	
5. Covering Period 1 1	25	2008		through	12	3 1	2008		
I certify that I have examined this I	Report and to th	ne best of m	y knowledge	and belief it i	s true, correct	and comple	te.		
Type or Print Name of Treasurer	Christina /	A. Metzler							
Signature of Treasurer Electro	nically Filed by	Christina	A. Metzler			Date 0	1 26	20	0 9
NOTE : Submission of false, error	neous, or incom	plete inform	nation may s	ubject the per	son signing th	is Report to	the penalties of	f 2 U.S.C 4	137g.
Office Use							FEC F	FORM 3	3X

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

OF RECEIPTS AND DISBURSEMENTS

Page 2

٧	Vrite or Type Committee Name The American Occupational Therapy Associa (AOTPAC)	ation, Inc. Political Action Committe	е
F	Report Covering the Period: From:	25 2008	To: 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Ž008 Y Y		79391.35
	(b) Cash on Hand at Begining of Reporting Period	87313.96	
	(c) Total Receipts (from Line 19)	17218.31	244292.87
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104532.27	323684.22
7.	Total Disbursements (from Line 31)	12390.04	231541.99
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	92142.23	92142.23
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Report Covering the Period:

м м 1 1

From:

^D 2 5

^Y 2 0 0 8

To:

м м 1 2 ^D 3 1

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	6750.43	55583.33
	(ii) Unitemized	10430.77	187200.21
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	17181.20	242783.54
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17181.20	242783.54
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	37.11	1509.33
8.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	17218.31	244292.87
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	17218.31	244292.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal	Į.	
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	280.04	11381.99
(c) Total Operating Expenditures	202.24	11001 00
(add 21(a)(i), (a)(ii) and (b))	280.04	11381.99
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	-2000.00	206000.00
4. Independent Expenditure (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 LLS C. 441a(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds	0.00	50.00
(add Lines 28(a), (b), and (c))		
9. Other Disbursements	14110.00	14110.00
D. Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
V	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely		
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12390.04	231541.99
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	12390.04	231541.99
HOTH LINE 31)	12330.04	231341.99

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	17181.20	242783.54
34.	Total Contribution Refunds (from Line 28(d))	0.00	50.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	17181.20	242733.54
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	280.04	11381.99
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	280.04	11381.99

FE6AN026

В.

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 50 (check only one)
		for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and addi	not be sold or used by any persess of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
The American Occupational Therap (AOTPAC)	y Association, I	nc. Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Ann Burkhardt			Date of Receipt
Mailing Address 132 Hope St			1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 27290718
<u>Bristol</u>	RI	02809-2048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		122.00
Name of Employer Long Island Univ	Occupation Occupation	nal Therapist	
Receipt For:	Aggregate '	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	275.00	
Full Name (Last, First, Middle Initial) Mary Margaret Arnold			Date of Receipt
Mailing Address 1119 Maysville Ave			11 25 2008
City	State	Zip Code	Transaction ID: 27290719
Zanesville	OH	43701-5557	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Zane State College	Occupation Occupation	nal Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate '	Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) Barbara Thoreson Brockevelt			Date of Receipt
Mailing Address 46357 309th St			1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 27290723
Vermillion	SD	57069-6412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer The University of South Dakota	Occupation Occupation	nal Therapist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	335.00	
SUBTOTAL of Receipts This Page (optional)		182.00

TOTAL This Period (last page this line number only)

В.

C.

	Г		FOR LINE NUMBER. DAGE 7/50
SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 50 (check only one)
ITEMIZED RECEIPTS		for each category of the	
TEMIZED RESERVES		Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and addi	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association, I	nc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) David Dennis Clark			Date of Receipt
Mailing Address 1012 Demorest Mour	nt Airy Hwy		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27290724
Mount Airy	GA	30563-3505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Self Employed Occupational	Occupation	onal Therapist	
Therapist Receipt For:		· · · · · · · · · · · · · · · · · · ·	-
Primary General	Aggregate	Year-to-Date ▼	,
Other (specify)		384.00	
Full Name (Last, First, Middle Initial) Dennis Sullivan Cleary			Date of Receipt
Mailing Address 275 Acton Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27290726
Columbus	OH	43214-3343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer The Ohio State Univ	Occupation Occupation	onal Therapist	
Receipt For:	Aggregate '	Year-to-Date ▼	
Primary General	33 0		1
Other (specify) ▼		244.00	
Full Name (Last, First, Middle Initial) Wendy Coster			Date of Receipt
Mailing Address 4 Harley Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27290727
Foxboro	MA	02035-1253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Boston University	Occupation	onal Therapist	7
Receipt For:		Year-to-Date ▼	\dashv
Primary General	Aggregate	rear-lu-Dale ▼	1
Other (specify)		283.00	
SUBTOTAL of Receipts This Page (optional)	1		90.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 50 (check only one) X 11a
An	for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any poster and address of any political committee y Association, Inc. Political Action Com	
<u>∠_</u> \.	Full Name (Last, First, Middle Initial) Nancy Michelle Daly Mailing Address 5 Andover Ct		Date of Receipt
	City	State Zip Code	1 1 2 5 2 0 0 8 Transaction ID: 27290732
	South Elgin FEC ID number of contributing federal political committee.	IL 60177-2906	Amount of Each Receipt this Period 30.00
	Name of Employer Self Employed Occupational Therapist Receipt For: Primary General Other (specify) ▼	Occupation Occupational Therapist Aggregate Year-to-Date 214.00	•
	Full Name (Last, First, Middle Initial) Anne Elizabeth Dickerson Mailing Address 1806 Planters Walk		Date of Receipt 1 1 2 5 2 0 0 8
	City	State Zip Code	Transaction ID: 27290734
	Greenville	NC 27858-8426	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer East Carolina Univ	Occupation Occupational Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 244.00	
	Full Name (Last, First, Middle Initial) Kathryn Melin Eberhardt		Date of Receipt
	Mailing Address 142 North Rebecca		11 25 7 4 4 9 9
	Claritand	State Zip Code IL 60425-1408	Transaction ID: 27290735
	Glenwood FEC ID number of contributing federal political committee.	IL 60425-1408	Amount of Each Receipt this Period 30.00
	Name of Employer South Suburban College	Occupation Occupational Therapy Assistant	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	•
S	UBTOTAL of Receipts This Page (optional)	90.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 50 (check only one) X 11a
Any information copied from such Re or for commercial purposes, other that	ports and Statements man using the name and ac	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The American Occupational (AOTPAC)	Therapy Association	, Inc. Political Action Commi	ttee
Full Name (Last, First, Middle Initi Mrs. Donna C Flowers	al)		Date of Receipt
Mailing Address 5406 Northm	noor Dr		11 25 2008
City	State	Zip Code	Transaction ID: 27290738
<u>Dallas</u>	TX	75229-3038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Amedisys Home Health Care	Occupati Occupa	on tional Therapist	
Receipt For:	Aggregat	te Year-to-Date 🔻	
Primary General Other (specify) ▼		214.00	
Full Name (Last, First, Middle Initi Christina Sue Griffin	al)		Date of Receipt
Mailing Address 8016 W Sier	ra Vista Dr		11 25 2008
City	State	Zip Code	Transaction ID: 27290739
Glendale	AZ	85303-3314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer A.T. Still Univ	Occupati Occupa	on tional Therapist	
Receipt For:	Aggregat	te Year-to-Date	
Primary General Other (specify) ▼		244.00	
Full Name (Last, First, Middle Initi	al)		Date of Receipt
Mailing Address 1642 Nw 104	1th Avenue		11 25 2008
City	State	Zip Code	Transaction ID: 27290741
Coral Springs	FL	33071-6534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer North Broward Medical Cen- ter	Occupati Occupa	on tional Therapist	
Receipt For:	Aggregat	te Year-to-Date ▼	
Primary ☐ General Other (specify) ▼		244.00	
SUBTOTAL of Receipts This Page	(optional)		90.00
TOTAL This Period (last page this I		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 50 (check only one) X 11a
A	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC)	Association,	Inc. Political Action Commit	tee
∠ A .	Full Name (Last, First, Middle Initial) Lisa Kay Iffland			Date of Receipt
	Mailing Address 1310 N Leavitt St #1			11 25 2008
	City	State	Zip Code	Transaction ID: 27290755
	Chicago	<u>IL</u>	60622-3026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Wilbur Wright College	Occupation Occupation	n onal Therapist	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 214.00	
— В.	Full Name (Last, First, Middle Initial) Georgette R Ireland			Date of Receipt
	Mailing Address 6696 Hidden Lake Trl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 27290756
	Brecksville	OH	44141-3178	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		30.00
	Name of Employer St. Vincent Charity Hosp	Occupation Occupation	n onal Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 284.00]
_ C.	Full Name (Last, First, Middle Initial) Jennifer Ann Johnson	l		Date of Receipt
	Mailing Address 603 Stagecoach VIg			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 27290757
	Little Rock	AR	72210-4773	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Univ of Central Arkansas	Occupation Occupation	n onal Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 214.00	
	SUBTOTAL of Receipts This Page (optional)		\	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persoloname and address of any political committee to Association, Inc. Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael D Justiss Mailing Address	State Zip Code IN 46222-4577 C Occupation Occupational Therapist Aggregate Year-to-Date 214.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Christine Lynn Kroll Mailing Address 1528 Chase Blvd City Greenwood FEC ID number of contributing federal political committee. Name of Employer Healthcare Therapy Service Receipt For: Primary General Other (specify)	State Zip Code IN 46142-1559 C Occupation Occupational Therapist Aggregate Year-to-Date 244.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Miss Michelle Lee Mailing Address	State Zip Code CA 90015-1415 C Occupation Student of Occupational Therapy Aggregate Year-to-Date 244.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	>	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The American Occupational Therapy (AOTPAC)	Association, Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Gloria R Lucker		Date of Receipt
Mailing Address Ste 234 2495 Main St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 27290761
<u>Buffalo</u>	NY 14214-2152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer DBA Optimal Therapy Assoc-	Occupation Occupational Therapist	
iates Service Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	789.00	
Full Name (Last, First, Middle Initial) Mrs Janelle Melissa Magee		Date of Receipt
Mailing Address 429 Church Street		11 25 2008
City	State Zip Code	Transaction ID: 27290762
Ambler	PA 19002-5811	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Theraplay, Inc.	Occupation Occupational Therapy Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	
Full Name (Last, First, Middle Initial) Signian Mcgeary		Date of Receipt
Mailing Address 106 Sloper Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 27290763
Cheshire	CT 06410-1532	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Quinnipiac Univ	Occupation Occupational Therapist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	244.00	
SUBTOTAL of Receipts This Page (optional)		90.00
SOBTOTAL OF NECERPLS THIS Fage (OPHOHAI)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/50 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may he name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The American Occupational Therapy (AOTPAC)	Association,	Inc. Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Jennifer Lee Mclaughlin			Date of Receipt
Mailing Address 105 Ruth Ellen Court	S		1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 27290764
Newark FEC ID number of contributing federal political committee.	C	19711-8511	Amount of Each Receipt this Period 45.00
Name of Employer PUMH, Inc.	Occupation Occupation	n ional Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Penelope A Moyers Cleveland Mailing Address 516 2nd Ave			Date of Receipt
City	State	Zip Code	1 1 2 5 2 0 0 8 Transaction ID: 27290767
Pleasant Grove	AL	35127-1757	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer Univ of Alabama at Birmin- oham	Occupation Occupation	n ional Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 646.00	
Full Name (Last, First, Middle Initial) Monica Lee Robinson			Date of Receipt
Mailing Address 368 W 6th Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Columbus	State OH	Zip Code 43201-3135	Transaction ID: 27290771
FEC ID number of contributing federal political committee.	C	45201-5155	Amount of Each Receipt this Period 75.00
Name of Employer HCR Manor Care	Occupation	n ional Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1215.00	
SUBTOTAL of Receipts This Page (optional)			180.00

В.

C.

			Ţ
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 50 (check only one)
TEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
		Detailed Summary Page	
		L	, , , , , , , , , , , , , , , , , , ,
Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association,	Inc. Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Julie Beth Rosenfeld			Date of Receipt
Mailing Address 7274 Gayola PI			1 1 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 27290772
Saint Louis	MO	63143-2318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer St. Louis Univ Hospital	Occupation Occupat	n ional Therapist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General	7.99.094.0		7
Other (specify) ▼		214.00	
Full Name (Last, First, Middle Initial) Jeremy Joseph Rush	•		Date of Receipt
Mailing Address 1021 21st Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27290773
Portsmouth	OH	45662-2809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer HCR Manor Care	Occupation Occupat	n ional Therapist	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify)	33 3	244.00	
Full Name (Last, First, Middle Initial) Carol Rose Scheerer			Date of Receipt
Mailing Address Apt 4 2121 St James Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27290774
Cincinnati	OH	45206-3611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Xavier University	Occupation Occupat	n ional Therapist	
Receipt For:		e Year-to-Date 🔻	
Primary General	1.99.0941		7
Other (specify) ▼		244.00	
SUBTOTAL of Receipts This Page (optional)			90.00
TILL OF HOODING THIS Fago (optional)			

TOTAL This Period (last page this line number only)

В.

C.

SCHEDULE A (FEC Form 3X)		Han annual call 11/1	FOR LINE NUMBER: PAGE 15 / 50			
•	Use separate schedule(s) for each category of the		(check only one)			
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
			13 14 15 16 17			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	ments may ne and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
The American Occupational Therapy Asso (AOTPAC)	ociation,	Inc. Political Action Committee	tee			
Full Name (Last, First, Middle Initial) Victoria Julia Schindler			Date of Receipt			
Mailing Address 819 Berrywood Ln			11 25 7 2008			
City	State	Zip Code	Transaction ID: 27290775			
Galloway	NJ	08205-4201	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		30.00			
Dichard Stockton College	Occupation Occupation	onal Therapist				
Receipt For: Primary General	Aggregate	Year-to-Date ▼	1			
Other (specify) ▼		214.00				
Full Name (Last, First, Middle Initial) Trina Lea Schulz			Date of Receipt			
Mailing Address 4915 Noble			11 25 7 2008			
City	State	Zip Code	Transaction ID: 27290776			
Shawnee	KS	66226-9797	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		30.00			
Univer Kandas Hospital	Occupation Occupation	onal Therapist				
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼		375.00				
Full Name (Last, First, Middle Initial) Barbara A Seguine			Date of Receipt			
Mailing Address 1608 Waterford Dr			1 1 2 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 27290778			
Bowling Green	OH	43402-1567	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		30.00			
Owens Community College	Occupation Occupation	onal Therapy Assistant				
- · · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼	7			
Primary General		214.00	1			
Other (specify) ▼	0 0	214.00				
SUBTOTAL of Receipts This Page (optional)			90.00			

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16/50		
•	Use separate schedule(s) for each category of the		(check only one)		
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
			13 14 15 16 17		
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
The American Occupational Therapy Ass (AOTPAC)	sociation, I	nc. Political Action Commit	tee		
Full Name (Last, First, Middle Initial) Ms. Danielle Sue Shuttleworth			Date of Receipt		
Mailing Address 722a Copeland St			111 25 2008		
City	State	Zip Code	Transaction ID: 27290780		
Pittsburgh	PA	15232-2224	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		30.00		
N/A ' '	Occupation Student o	f Occupational Therapy			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 244.00			
Full Name (Last, First, Middle Initial) Stephanie Singleton			Date of Receipt		
Mailing Address 2917 Santa Monica Se			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 27290781		
Albuquerque	NM	87106-2962	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		30.00		
Drochytorian' Hômo Hoalth	Occupation	onal Therapist			
Receipt For:	Aggregate	Year-to-Date ▼			
Primary ☐ General Other (specify) ▼		314.00			
Full Name (Last, First, Middle Initial) Linda Coogle Stephens			Date of Receipt		
Mailing Address 2361 Fairoaks Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 27290783		
Decatur	GA	30033-1207	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		30.00		
Retired	Occupation Occupation	onal Therapist			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 335.00			
SUBTOTAL of Receipts This Page (optional)			90.00		

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 17 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
A .	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC) Full Name (Last, First, Middle Initial) Jacqueline Rose Webel Mailing Address Apt 3w 6823 Kingsbury Blvd City Saint Louis			
_	FEC ID number of contributing federal political committee. Name of Employer N/A Receipt For: Primary General Other (specify) ▼	-	n IT of Occupational Therapy e Year-to-Date ▼ 214.00	30.00
B.	Full Name (Last, First, Middle Initial) Kathleen M Weissberg Mailing Address 115 Beaufort Lane City Milford FEC ID number of contributing federal political committee. Name of Employer Endura Care Therapy Mgmt Receipt For: Primary General Other (specify)		Zip Code 19963-3780 In ional Therapist e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ С.	Full Name (Last, First, Middle Initial) Grace Lee Williams Mailing Address 2355 N Vermont St City Arlington FEC ID number of contributing federal political committee. Name of Employer Arlington County Public Schools Receipt For: Primary General Other (specify)		Zip Code 22207-4052 In ional Therapist e Year-to-Date ▼ 254.00	Date of Receipt M M
ſ	SUBTOTAL of Receipts This Page (optional)			90.00

Any information copied from such Reports and Sta or for commercial purposes, other than using the results of the commercial purposes, other than using the results of the commercial purposes, other than using the results of the commercial purposes, other than using the results of the commercial purposes, other than using the results of the commercial purposes. Full Name (Last, First, Middle Initial) Georgetta W Piper Mailing Address 1605 N 81st St City Kansas City FEC ID number of contributing federal political committee. Name of Employer Kansas Board of Ed	name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Georgetta W Piper Mailing Address 1605 N 81st St City Kansas City FEC ID number of contributing federal political committee.	State Zip Code KS 66112-2114	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Georgetta W Piper Mailing Address 1605 N 81st St City Kansas City FEC ID number of contributing federal political committee.	KS 66112-2114	1 1 2 5 2 0 0 8 Transaction ID: 27290815
City Kansas City FEC ID number of contributing federal political committee.	KS 66112-2114	1 1 2 5 2 0 0 8 Transaction ID: 27290815
Kansas City FEC ID number of contributing federal political committee.	KS 66112-2114	
FEC ID number of contributing federal political committee.		Amount of Lacif Neceipt this Feriod
Name of Employer Kansas Board of Ed		30.00
	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Mr. Scott David Nordquist Mailing Address 11874 Canterbury Dr.		Date of Receipt
		11 25 2008
City Sterling Heights	State Zip Code MI 48312-3019	Transaction ID: 27290817
FEC ID number of contributing federal political committee.	C 46512-5019	Amount of Each Receipt this Period 30.00
Name of Employer St. John's Hospital	Occupation Occupational Therapy Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) Sheri Montgomery		Date of Receipt
Mailing Address 313 Herschler Ave		1 1 2 5 2 0 0 8
City	State Zip Code	Transaction ID: 27290819
Evanston	WY 82930-5005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Uinta County School Dist #4	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.00	
SUBTOTAL of Receipts This Page (optional)		90.00

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19/50 (check only one) X 11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) The American Occupational Thera (AOTPAC)	py Association,	Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Kathleen Marie Kehm			Date of Receipt
Mailing Address 6294 W College Av	/e		11 25 2008
City Greendale	State WI	Zip Code 53129-2801	Transaction ID: 27290822 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer Aurora Healthcare	Occupation Occupation	n onal Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) Ms. Alaine D Defour			Date of Receipt
Mailing Address 40285 Tonabee Ct.			1 1 25 2008
City	State	Zip Code	Transaction ID: 27290828
Sterling Heights	MI	48313-4177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer N/A	Occupation Student of	n of Occupational Therapy	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 335.00	
Full Name (Last, First, Middle Initial) Janet Elizabeth Stafford			Date of Receipt
Mailing Address 67 Hackett Hill Rd			11 25 2008
City Manchester	State	Zip Code	Transaction ID: 27318896
FEC ID number of contributing federal political committee.	C	03102-8991	Amount of Each Receipt this Period 30.42
Name of Employer DBA Kidz Play Pediatric Therapy and We		onal Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 273.78	
SUBTOTAL of Receipts This Page (optional	al)		90.42

SCHEDULE A (FEC Form 3X)

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 50 (check only one) X
or for commercial purp	oses, other than using the nar	me and addr	not be sold or used by any person ress of any political committee to nc. Political Action Commit	on for the purpose of soliciting contributions o solicit contributions from such committee.
/ (AOTPAC)		Ocialion, ii	nc. Political Action Commit	iee
Full Name (Last, Fi	ėll			Date of Receipt
Mailing Address	1720 Erica Drive			11 28 2008
City North Las Vega:	•	State NV	Zip Code 89032-0319	Transaction ID: 27453178 Amount of Each Receipt this Period
FEC ID number of federal political con	contributing	C	09032-0313	365.00
Name of Employer MountainLand		Occupation Occupation	onal Therapist	7
Receipt For: Primary Other (specif	General	<u> </u>	Year-to-Date ▼ 465.00	
Full Name (Last, Fi	<u>, </u>			Date of Receipt
	Apt 605 372 Gateway Dr Se			12 01 2008
City		State	Zip Code	Transaction ID: 27453182
Leesburg FEC ID number of federal political con		C	20175-4053	Amount of Each Receipt this Period 200.00
Name of Employer Amedisys Home H	solth Cara	Occupation Occupation	onal Therapist	
Receipt For: Primary Other (specif	General	Aggregate '	Year-to-Date ▼ 400.00	
Full Name (Last, Fi Samia H Rafeedie	rst, Middle Initial)			Date of Receipt
	Apt 4 2425 Texas Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 27453185
Los Angeles FEC ID number of federal political con		CA	90025-1928	Amount of Each Receipt this Period 365.00
Name of Employer Univ of Southern C	aliforn	Occupation Occupation	onal Therapist	
Receipt For: Primary Other (specif	General	Aggregate `	Year-to-Date ▼ 365.00	
SUBTOTAL of Recei	ots This Page (optional)			930.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 50 (check only one) X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC)	association, Inc. Political Action Comr	nittee
Full Name (Last, First, Middle Initial) Rebecca E Argabrite Grove		Date of Receipt
Mailing Address 41718 Browns Farm La	ane	12 03 2008
City	State Zip Code	Transaction ID: 27453191
Leesburg	VA 20176-6026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.00
Name of Employer Loudoun County Public Sch- ools	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) Jon Clair Turnquist		Date of Receipt
Mailing Address 2365 110th St		12 05 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 27485615
<u>Delmar</u>	IA 52037-9333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer St. Ambrose University	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Erna Imperatore Blanche		Date of Receipt
Mailing Address 6409 1/2 Pacific Ave		12 09 7 7 7 7
City Playa Del Rey	State Zip Code CA 90293-7534	Transaction ID: 27486455 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Therapy West Inc	Occupation Occupational Therapist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional)		496.00

TOTAL This Period (last page this line number only)

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 50 (check only one) X 11a
Any or fo	information copied from such Reports and S r commercial purposes, other than using the	Statements may e name and addi	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
} т	AME OF COMMITTEE (In Full) The American Occupational Therapy A AOTPAC)	Association, I	nc. Political Action Commit	itee
F	ull Name (Last, First, Middle Initial) fichael Rizkalla			Date of Receipt
N	lailing Address 3 Oak Tree Ln			12 09 2008
	ity	State	Zip Code	Transaction ID: 27486456
_	łolmdel	NJ	07733-1136	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		365.00
N T	ame of Employer rinity Rehab	Occupation Occupation	nal Therapist	
R	eceipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 365.00	
	ull Name (Last, First, Middle Initial) ynne M Richard			Date of Receipt
_	lailing Address 987 Oakland Ave			1 2 0 7 2 0 0 8
C	ity	State	Zip Code	Transaction ID: 27625110
<u>F</u>	Plainfield	NJ	07060-3431	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		100.00
N	lame of Employer cean Univ	Occupation Occupation	onal Therapist	
R	eceipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 300.00	
	ull Name (Last, First, Middle Initial) ane Ellen Olson	1		Date of Receipt
_	failing Address 14122 Waters Way			12 02 YYYY 12 02 2008
C	ity	State	Zip Code	Transaction ID: 27625118
_	lew Berlin	WI	53151-4563	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		50.00
N N	lame of Employer flount Mary College	Occupation Occupation	onal Therapist	
R	eceipt For: Primary General Other (specify) ▼	, ' 	Year-to-Date ▼ 250.00	
sur	BTOTAL of Receipts This Page (optional)			515.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 50 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The American Occupational Therap (AOTPAC)	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Chris Pleitner Mailing Address 8517 Forest Ave			Date of Receipt 1 2 0 8 2 0 0 8
City Munster FEC ID number of contributing	State IN	Zip Code 46321-2120	Transaction ID: 27625136 Amount of Each Receipt this Period 100.00
Name of Employer DBA NW Indiana Rehab Svcs Inc Receipt For: Primary General Other (specify)	Occupatio Occupati	n ional Therapist e Year-to-Date ▼ 441.00]
Full Name (Last, First, Middle Initial) Susan K Goszewski Mailing Address 225 Oregon Rd			Date of Receipt 1 2 0 2 2 0 0 8
City Cheshire	State CT	Zip Code 06410-1827	Transaction ID: 27625195 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.42
Name of Employer Yale New Haven Hosp Receipt For: Primary General		n ional Therapist e Year-to-Date ▼ 334.58	1
Other (specify) ▼ Full Name (Last, First, Middle Initial) L Diane Parham	0 0		Date of Receipt
Mailing Address 11 Calle Cobre			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Placitas	State NM	Zip Code 87043-9306	Transaction ID: 27625201 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.42
Name of Employer Univ of New Mexico		ional Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 312.94	
SUBTOTAL of Receipts This Page (optional	al)		160.84

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Δ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24/50 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using	d Statements may	y not be sold or used by any perse dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		aroos or any pomissis sommittee to	
The American Occupational Therap (AOTPAC)	y Association,	Inc. Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Denise Chisholm			Date of Receipt
Mailing Address 1603 Heritage Drive)		12 12 2008
City	State	Zip Code	Transaction ID: 27625210
Pittsburgh	PA	15237-7616	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer Univ of Pittsburgh, Dept of OT	Occupation Occupation	n onal Therapist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) Joseph Thomas Hege			Date of Receipt
Mailing Address 2597 Sacramento S	Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27625238
San Francisco	CA	94115-2215	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		365.00
Name of Employer N/A	Occupation Student	n of Occupational Therapy	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Marie-Colette Noel			Date of Receipt
Mailing Address 533 Greenwood Ct			12 15 2008
City	State	Zip Code	Transaction ID: 27625410
W Hempstead	NY	11552-3323	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		243.33
Name of Employer Manhattan Psychiatric Cen- ter	Occupation Occupation	n onal Therapist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	365.00	

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 50 (check only one) X 11a
Any i	information copied from such Reports and St r commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
> T	AME OF COMMITTEE (In Full) The American Occupational Therapy A AOTPAC)	Association,	Inc. Political Action Commit	tee
F	ull Name (Last, First, Middle Initial) hristina A Metzler			Date of Receipt
M	lailing Address 2153 California St., NW	V Apt 405		12 19 2008
	ity	State	Zip Code	Transaction ID: 27634958
<u>v</u>	Vashington	DC	20008-1843	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		366.00
N A	ame of Employer merican Occupational The- apy Associat	Occupatio Chief Pu	n blic Affairs Officer	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 366.00	
	ull Name (Last, First, Middle Initial) Jonna M Adam Wooster			Date of Receipt
_	lailing Address 28003 Oakachoy Loop			M M / D D / Y Y Y Y Y 1 1 2 2 2 2 0 0 8
C	ity	State	Zip Code	Transaction ID: 27634984
<u>D</u>	<u> Daphne</u>	AL	36526-7660	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		31.00
N U	ame of Employer Iniv of South Alabama	Occupatio Occupati	n ional Therapist	7
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 245.00	
	ull Name (Last, First, Middle Initial) vonne Michielle Randall			Date of Receipt
M	lailing Address 6576 Appletree Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity as Vegas	State NV	Zip Code 89103-4325	Transaction ID: 27634986
F	EC ID number of contributing	C	69103-4325	Amount of Each Receipt this Period 31.00
_	ederal political committee.			
T	ame of Employer ouro University Nevada	Occupatio Occupati	ⁿ ional Therapist	
R	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
SUE	BTOTAL of Receipts This Page (optional)			428.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	solicit contributions from such committee.
(AOTPAC)	y Association, Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Chris Pleitner		Date of Receipt
Mailing Address 8517 Forest Ave		12 22 2008
City Munster	State Zip Code IN 46321-2120	Transaction ID: 27634987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.00
Name of Employer DBA NW Indiana Rehab Svcs Inc	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 472.00	
Full Name (Last, First, Middle Initial) Ms. Alaine D Defour		Date of Receipt
Mailing Address 40285 Tonabee Ct.		12 22 2008
City	State Zip Code	Transaction ID: 27634988
Sterling Heights FEC ID number of contributing federal political committee.	MI 48313-4177	Amount of Each Receipt this Period 31.00
Name of Employer N/A	Occupation Student of Occupational Therapy	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 366.00	
Full Name (Last, First, Middle Initial) Katherine Jean Rolo		Date of Receipt
Mailing Address 204 Cedar Lane Dr		12 22 2008
City	State Zip Code	Transaction ID: 27634998
Winfield FEC ID number of contributing federal political committee.	KS 67156-8804	Amount of Each Receipt this Period 31.00
Name of Employer Rehab Care	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	
		93.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 50 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	Use to be sold or used by any persondress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
The American Occupational Therapy A (AOTPAC)	Association,	Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Georgetta W Piper			Date of Receipt
Mailing Address 1605 N 81st St			12 / 22 / 2008
City	State	Zip Code	Transaction ID: 27634999
Kansas City	KS	66112-2114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer Kansas Board of Ed	Occupatio	n ional Therapist	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	39.19	240.00	
Full Name (Last, First, Middle Initial) Mr. Scott David Nordquist	1		Date of Receipt
Mailing Address 11874 Canterbury Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27635000
Sterling Heights	MI	48312-3019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer St. John's Hospital	Occupatio Occupat	n ional Therapy Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 366.00	
Full Name (Last, First, Middle Initial) Janet M Neely	l		Date of Receipt
Mailing Address 1407 Southgate Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27635002
Knoxville	TN	37919-8322	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Roane State Community Col- lege	Occupatio Occupati	n ional Therapy Assistant	7
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼		259.00	
SUBTOTAL of Receipts This Page (optional)			92.00

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COUEDINE A /EEO E CVV			FOR LINE NUMBER: PAGE 28 / 50
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association,	Inc. Political Action Commit	itee
Full Name (Last, First, Middle Initial) Sheri Montgomery			Date of Receipt
Mailing Address 313 Herschler Ave			12 22 2008
City	State	Zip Code	Transaction ID: 27635005
Evanston	WY	82930-5005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Uinta County School Dist #4	Occupation Occupat	on ional Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1062.00	
Full Name (Last, First, Middle Initial) Beverly A Meredith			Date of Receipt
Mailing Address Po Box 353			12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27635007
Perry	KS	66073-0353	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer St. Frances Health Center	Occupation Occupation	on ional Therapy Assistant	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 214.00	
Full Name (Last, First, Middle Initial) Jamie Lea Mcnally			Date of Receipt
Mailing Address 1479 E 688th Rd			12 22 YYYYY 12 22 2008
City	State	Zip Code	Transaction ID: 27635008
Lawrence	KS	66049-9123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer St. Francis Health Center	Occupation Occupat	on ional Therapist	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	325.00]
SUBTOTAL of Receipts This Page (optional) .	1		93.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to Association, Inc. Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Lisa A Jackson Mailing Address 320 Susie Dr City	State Zip Code	Date of Receipt M
Winchester FEC ID number of contributing federal political committee.	TN 37398-2558	Amount of Each Receipt this Period 30.00
Name of Employer Amedisys Home Health Receipt For: Primary General Other (specify) ▼	Occupation Occupational Therapist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Kathleen Theresa Foley Mailing Address 212 15th Street South Shpb 353 Kathy Foley City Birmingham FEC ID number of contributing federal political committee. Name of Employer Univ of Alabama at Birmingham Receipt For: Primary General Other (specify)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Harriett Smith Bynum Mailing Address 100 Cottonwood Dr City Oakdale FEC ID number of contributing federal political committee. Name of Employer Kent State University Receipt For: Primary General Other (specify)	State Zip Code PA 15071-1108 C Occupation Occupational Therapist Aggregate Year-to-Date 366.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	>	92.00

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\	OF COMMITTEE (In Full) nerican Occupational Therapy <i>A</i> AC)	Association,	Inc. Political Action Commit	tee	
Brent Hov	ne (Last, First, Middle Initial) ward Braveman			Date of R	Receipt
Mailing A	Address Unit 3c 1447 W Victoria St			1 2	22 / 2008
City	_	State	Zip Code		ion ID: 27635028
	onumber of contributing olitical committee.	C	60660-4220	Amount o	of Each Receipt this Period 31.00
Name of Universit	Employer y of Illinois	Occupation	n onal Therapist		
	For: mary General ner (specify) ▼		Year-to-Date ▼ 606.00		
Full Nam Carolyn E	ne (Last, First, Middle Initial) Baum			Date of R	Receipt
Mailing A	Address 6314 S Rosebury 3 We	1 2	22 YYYY 22 2008		
City		State	Zip Code	Transacti	ion ID: 27635029
<u>Claytor</u>	1	MO	63105-2255	Amount o	of Each Receipt this Period
	number of contributing olitical committee.	C			31.00
Name of Washing Medicine	Employer yton Univ School of	Occupation Occupation	n onal Therapist		
	For: mary General ner (specify) ♥	Aggregate	Year-to-Date ▼ 335.00]	
	ne (Last, First, Middle Initial) garet Arnold	l		Date of R	Receipt
Mailing A	Address 1119 Maysville Ave			1 2	23 YYYYY 23 2008
City		State	Zip Code	Transacti	ion ID: 27635061
<u>Zanesv</u>		OH	43701-5557	Amount o	of Each Receipt this Period
	number of contributing olitical committee.	C			31.00
Name of Zane Sta	Employer ate College	Occupation Occupation	n onal Therapist		
Receipt F		. '	Year-to-Date ▼		
	mary General ner (specify) ▼		366.00		
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COLLEDING A (EEO E ON)			FOR LINE NUMBER: PAGE 31 / 50
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association,	Inc. Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Barbara Thoreson Brockevelt			Date of Receipt
Mailing Address 46357 309th St			12 23 2008
City	State	Zip Code	Transaction ID: 27635065
Vermillion	SD	57069-6412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer The University of South Dakota	Occupation Occupat	n ional Therapist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		366.00	
Full Name (Last, First, Middle Initial) Ann Burkhardt	•		Date of Receipt
Mailing Address 132 Hope St			12 DD / YYYYY 12 23 2008
City	State	Zip Code	Transaction ID: 27635066
Bristol	RI	02809-2048	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Long Island Univ	Occupation Occupat	n ional Therapist	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼		306.00	
Full Name (Last, First, Middle Initial) David Dennis Clark	-		Date of Receipt
Mailing Address 1012 Demorest Moun	t Airy Hwy		1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27635067
Mount Airy	GA	30563-3505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		31.00
Name of Employer Self Employed Occupational	Occupation Occupation	n ional Therapist	
Therapist Receipt For:		e Year-to-Date ▼	_
Primary General	, .gg. ogait		7
Other (specify) ▼	0 0	415.00	
SUBTOTAL of Receipts This Page (optional) .			93.00

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate s for each categ Detailed Sumr	schedule(s) ory of the	FOR LINE NUMBER: PAGE 32 / 50 (check only one) X
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The American Occupational Therapy	e name and address of any politic	cal committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
\angle	(AOTPAC)	ASSOCIATION, INC. FORTICAL AC		=
	Full Name (Last, First, Middle Initial) Nancy Ellen Clark			Date of Receipt
	Mailing Address 3080 Hecla St			12 23 7 2008
	City Butte	State Zip Code MT 59701-6320		Transaction ID: 27635068 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
	Name of Employer St. James Healthcare	Occupation Occupational Therapist		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	214.00	
	Full Name (Last, First, Middle Initial) Dennis Sullivan Cleary			Date of Receipt
	Mailing Address 275 Acton Rd			12 23 YYYY 12 23 2008
	City	State Zip Code		Transaction ID: 27635069
	Columbus	OH 43214-3343		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer The Ohio State Univ	Occupation Occupational Therapist		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		275.00	
	Full Name (Last, First, Middle Initial) Wendy Coster			Date of Receipt
	Mailing Address 4 Harley Ln			12 23 2008
	City	State Zip Code		Transaction ID: 27635070
	Foxboro	MA 02035-1253		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer Boston University	Occupation Occupational Therapist		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	314.00	
_		<u> </u>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 50 (check only one) X 11a
Ar	for commercial purposes, other than using t NAME OF COMMITTEE (In Full) The American Occupational Therapy	Statements may not be sold or used by any point name and address of any political committed. Association, Inc. Political Action Committed.	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	(AOTPAC) Full Name (Last, First, Middle Initial) Nancy Michelle Daly		Date of Receipt
	Mailing Address 5 Andover Ct City	State Zip Code	1 2 D 27625071
	South Elgin	IL 60177-2906	Transaction ID: 27635071 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31.00
	Name of Employer Self Employed Occupational Therapist Receipt For: Primary General Other (specify) ▼	Occupation Occupational Therapist Aggregate Year-to-Date 245.00	•
	Full Name (Last, First, Middle Initial) Anne Elizabeth Dickerson Mailing Address 1806 Planters Walk		Date of Receipt
	City	State Zip Code	12 23 2008
	Greenville	NC 27858-8426	Transaction ID: 27635073 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31.00
	Name of Employer East Carolina Univ	Occupation Occupational Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	•
	Full Name (Last, First, Middle Initial) Mrs. Donna C Flowers		Date of Receipt
	Mailing Address 5406 Northmoor Dr		12 23 2008
	City	State Zip Code	Transaction ID: 27635076
	Dallas FEC ID number of contributing federal political committee.	TX 75229-3038	Amount of Each Receipt this Period 31.00
	Name of Employer Amedisys Home Health Care	Occupation Occupational Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
	UBTOTAL of Receipts This Page (optional)		93.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 34 / 50 (check only one) X
\ 	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC) Full Name (Last, First, Middle Initial)			
Α.	Christina Sue Griffin Mailing Address 8016 W Sierra Vista Dr			Date of Receipt 1 2 2 3 2 0 0 8
	City Glendale EEC ID number of contributing	State AZ	Zip Code 85303-3314	Transaction ID: 27635078 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer A.T. Still Univ Receipt For:	<u> </u>	on ional Therapist e Year-to-Date ▼	31.00
_	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregati	275.00]
В.	Ms Holly Lynn Hendryx Mailing Address 1642 Nw 104th Avenue			Date of Receipt 1 2 2 3 7 2 0 0 8
	City Coral Springs FEC ID number of contributing federal political committee.	State FL C	Zip Code 33071-6534	Transaction ID: 27635080 Amount of Each Receipt this Period 31.00
	Name of Employer North Broward Medical Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		on ional Therapist e Year-to-Date ▼ 275.00	
С.	Full Name (Last, First, Middle Initial) Lisa Kay Iffland Mailing Address 1310 N Leavitt St #1			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60622-3026	Transaction ID: 27635082 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer Wilbur Wright College		ional Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
	SUBTOTAL of Receipts This Page (optional)			93.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 50 (check only one) X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC)	name and ad	dress of any political committee to	solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Georgette R Ireland Mailing Address 6696 Hidden Lake Trl			Date of Receipt 1 2 2 3 2 0 0 8
	City Brecksville	State OH	Zip Code 44141-3178	Transaction ID: 27635083 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer St. Vincent Charity Hosp	Occupation Occupat	n ional Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
_	Full Name (Last, First, Middle Initial) Jennifer Ann Johnson Mailing Address 603 Stagecoach VIg			Date of Receipt 1 2 2 3 2 0 0 8
	City	State	Zip Code	Transaction ID: 27635084
	Little Rock	AR	72210-4773	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer Univ of Central Arkansas	Occupation Occupat	n ional Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
	Full Name (Last, First, Middle Initial) Michael D Justiss			Date of Receipt
	Mailing Address Apt 204 55 S Harding St			12 23 2008
	City Indianapolis	State IN	Zip Code 46222-4577	Transaction ID: 27635085 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer Indiana University	Occupation Occupat	n ional Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 245.00	
S	UBTOTAL of Receipts This Page (optional)			93.00

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A. M.	or commercial purposes, other than using the notation of COMMITTEE (In Full) The American Occupational Therapy As AOTPAC) Full Name (Last, First, Middle Initial) Miss Michelle Lee Mailing Address Apt 736 645 W 9th St Dity Los Angeles	• • • • • • • • • • • • • • • • • • • •	
F for N	Receipt For: Primary Other (specify)	Occupation Student of Occupational Therapy Aggregate Year-to-Date 275.00	31.00
B. <u>C</u> N	Full Name (Last, First, Middle Initial) Christine Lynn Kroll Mailing Address 1528 Chase Blvd City Greenwood FEC ID number of contributing ederal political committee. Name of Employer Healthcare Therapy Service Receipt For: Primary General Other (specify)	State Zip Code IN 46142-1559 C Occupation Occupational Therapist Aggregate Year-to-Date 275.00	Date of Receipt M M Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z
C. G. N. C. G. F. F. F. F. C. G.	Full Name (Last, First, Middle Initial) Gloria R Lucker Mailing Address Ste 234 2495 Main St City Buffalo FEC ID number of contributing ederal political committee. Name of Employer DBA Optimal Therapy Assocates Service Receipt For: Primary General Other (specify)	State Zip Code NY 14214-2152 C Occupation Occupational Therapist Aggregate Year-to-Date 820.00	Date of Receipt M M M / 23 / 2008 Transaction ID: 27635088 Amount of Each Receipt this Period 31.00
SUI	BTOTAL of Receipts This Page (optional)		93.00

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Any information copied from such Reports and Statements may not sold or used by any person for the purpose of soliciting contribution of or commercial purposes, other than using the name and address of any political committee to solicit committees of soliciting contributions. NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) The American Occupational Therapy Association, Inc. Political Action Committee (ACTPAC) Full Name (Last, First, Middle Initial) Mrs. Janaele Melissa Magee Mailing Address 429 Church Street City State Zip Code Ambler PA 19002-5811 FEC 10 number of contributing federal political committee. City State Zip Code Primary General Other (specify) ▼ Cocupation Occupational Therapy Assistant Aggregate Year-to-Date ▼ First, Middle Initial) Signian Megeavy City State Zip Code CT 66410-1532 Transaction ID: 27635099 Amount of Each Receipt this Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635099 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris C Transaction ID: 27635091 Amount of Each Receipt This Peris	
TEMIZED RECEIPTS	37 / 50
Detailed Summary Page 13	7
upy information copied from such Reports and Statements may not be add or used by any person for the purpose of soliciting contribution for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) Full Name (Last, First, Middle Initial) With Sanelle Melisses Magoe Malling Address 429 Church Street City State Zip Code PA 19002-5811 C City State Zip Code Occupation Occupational Therapy Assistant Aggregate Year-to-Date Transaction ID: 27635099 Amount of Each Receipt this Perit Zip Code City State Zip Code City State City State City State City State City Aggregate Year-to-Date PEC: ID number of contributing federal political committee. City Primary General Other (specify) City State City S	12
And Corporation of the committee of the	16 17
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) Full Name (Last, First, Middle Initial) Mrs Janele Melisas Mage Mailing Address 429 Church Street City Ambler PA 19002-5811 FEC ID number of contributing feederal political committee. C cupation Occupational Therapy Assistant Receipt For: Primary General Other (specify) C Goupation Occupational Therapy Assistant Aggregate Year-to-Date PEC ID number of contributing feederal political committee. C Date of Receipt this Perit 12 23 20 Transaction ID: 27635089 Amount of Each Receipt this Perit 12 23 20 Transaction ID: 27635099 Amount of Each Receipt this Perit 12 23 20 Transaction ID: 27635090 Transaction ID: 27635090 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635090 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635090 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635090 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635090 Transaction ID: 27635090 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635090 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 25 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 25 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perit 12 25 7 20 Transaction ID: 27635091 Amount of Each Receipt 12 25 7 20 Transaction ID: 27635091 Amount of Each Receipt 12 25 7 20 Transaction ID: 276350	outions nittee.
(AOTPAC) Full Name (Last, First, Middle Initial) Mrs.Janelle Melissa Magee Maling Address 429 Church Street City Ambler PA 19002-5811 FEC ID number of contributing federal political committee. PA 19002-5811 Aggregate Year-to-Date City Cit	
Mailing Address 429 Church Street City State Zip Code PA 19002-5811 FEC ID number of contributing federal political committee. Name of Employer Primary General Other (specify) ▼ General Other (spe	
City State Zip Code Ambler PA 19002-59:11 FEC ID number of contributing federal political committee. Name of Employer Thirange (Last, First, Middle Initial) Signian Mogeary Mailing Address 106 Sloper Ln City State Zip Code CT 06410-1532 CT 06410-1532 CT 06410-1532 Aggregate Year-to-Date ▼ Transaction ID: 27635099 Amount of Each Receipt this Peric Transaction ID: 27635099 Amount of Each Receipt this Peric Transaction ID: 27635090 Amount of Each Receipt this Peric Transaction ID: 27635090 Amount of Each Receipt this Peric Transaction ID: 27635090 Amount of Each Receipt this Peric Transaction ID: 27635090 Transaction ID: 27635090 Amount of Each Receipt this Peric Transaction ID: 27635090 Transaction ID: 27635090 Amount of Each Receipt this Peric Transaction ID: 27635090 Transaction ID: 27635090 Date of Receipt Transaction ID: 27635090 Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Amount of Each Receipt this Peric Transaction ID: 27635091 Transaction ID: 27635091 Transaction ID: 27635091 Transaction ID: 27635090 Transaction ID: 27635091 Transaction ID:	
Ambler PA 19002-5811 FEC ID number of contributing federal political committee. Name of Employer Theraplay, Inc.	2008
Ambler PA 19002-5811 FEC ID number of contributing federal political committee. Name of Employer Theraplay, Inc. Occupation Occupational Therapy Assistant	
Name of Employer Theraplay, Inc. Receipt For: Primary General Other (specify) ▼ CIty Cheshire FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ Cocupation Cocupation Cocupation Code that Ellen Court S City Primary General Other (specify) ▼ Cocupation Cocupation Occupation Occ	Period
Theraplay, Inc.* Receipt For: Primary General Other (specify) City State Zip Code CT 06410-1532 Cheshire CT 06410-1532 Cheshire CT 06410-1532 Receipt For: Primary General Other (specify) Other (specify) City State Zip Code CT 06410-1532 CT 06410-1532 CT 06410-1532 Amount of Employer Occupation Occupational Therapist Receipt For: Primary General Other (specify) Name of Employer Date State Zip Code CT 00410-1532 Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 27635090 Amount of Each Receipt this Period State Zip Code DE 19711-8511 Date of Receipt Transaction ID: 27635091 Amount of Each Receipt Transaction ID: 27635091 Date of Receipt Transaction ID: 27635091 Amount of Each Receipt Transaction ID: 27635091 Transaction ID: 27635091 Amount of Each Receipt Transaction ID: 27635091 Amount of Each Receipt Transaction ID: 27635091 Amount of Each Receipt this Period State Zip Code DE 19711-8511 City State Zip Code DE 19711-8511 Amount of Each Receipt this Period State	31.00
Receipt For: Primary	
Primary General Other (specify) ▼	
Other (specify) ▼	
Signian Mogeary Mailing Address 106 Sloper Ln City State Zip Code CT 06410-1532 FEC ID number of contributing federal political committee. Name of Employer Quinniplac Univ City State Zip Code CT 06410-1532 C C	
City State Zip Code CT 06410-1532 FEC ID number of contributing federal political committee. Name of Employer Quimipliac Univ Occupation Occupational Therapist Receipt For: Primary General Other (specify) ▼ City State Zip Code DE 19711-8511 Pagregate Year-to-Date ▼ Transaction ID: 27635090 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Date of Receipt Transaction ID: 27635090 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Date of Receipt Transaction ID: 27635090 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Date of Receipt Transaction ID: 27635091 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State State Zip Code DE 19711-8511 Amount of Each Receipt this Perion State	
Cheshire CT 06410-1532 Amount of Each Receipt this Period State Sip Code Newark FEC ID number of contributing federal political committee. C 31 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt this Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Code Transaction ID: 27635091 Amount of Each Receipt This Period State Sip Co	2008
FEC ID number of contributing federal political committee. Name of Employer Quinnipiac Univ	
Name of Employer Quinnipiac Univ Receipt For:	eriod
Receipt For: Primary General Aggregate Year-to-Date ▼	31.00
Receipt For: Primary	
Primary General Other (specify) ▼ 275.00	
Date of Receipt	
Mailing Address 105 Ruth Ellen Court S City State Zip Code Newark DE 19711-8511 FEC ID number of contributing federal political committee. Name of Employer PUMH, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 12 23 7 20 Transaction ID: 27635091 Amount of Each Receipt this Perior 45 Aggregate Year-to-Date ▼ 45 Aggregate Year-to-Date ▼	
Newark DE 19711-8511 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 45 Name of Employer PUMH, Inc. Name of Employer PUMH, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 445.00 107	2008
Newark DE 19711-8511 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C 45 Name of Employer PUMH, Inc. Name of Employer PUMH, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 445.00 107	
FEC ID number of contributing federal political committee. Name of Employer PUMH, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 45 Aggregate Year-to-Date ▼	Period
Receipt For: Primary Other (specify) Aggregate Year-to-Date 445.00	45.00
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 445.00	
Primary General Other (specify) ▼ 445.00	
Other (specify) ¥	
107	
SUBTOTAL of Receipts This Page (optional)	07.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 50 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The American Occupational Thera	and Statements may not be sold or used by any perso ig the name and address of any political committee to apy Association, Inc. Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Penelope A Moyers Cleveland Mailing Address 516 2nd Ave City Pleasant Grove	State Zip Code AL 35127-1757	Date of Receipt 1 2 2 3 2 0 0 8 Transaction ID: 27635096
FEC ID number of contributing federal political committee. Name of Employer Univ of Alabama at Birmin-	Occupation	Amount of Each Receipt this Period 62.00
Glik of Alabama at Birmin- gham Receipt For: Primary General Other (specify) ▼	Occupational Therapist Aggregate Year-to-Date ▼ 708.00	
Full Name (Last, First, Middle Initial) Monica Lee Robinson Mailing Address 368 W 6th Ave	1	Date of Receipt 1 2 2 3 2 0 0 8
City Columbus FEC ID number of contributing federal political committee.	State Zip Code OH 43201-3135 C	Transaction ID: 27635100 Amount of Each Receipt this Period 75.00
Name of Employer HCR Manor Care Receipt For:	Occupation Occupational Therapist Aggregate Year-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1290.00	
Full Name (Last, First, Middle Initial) Julie Beth Rosenfeld Mailing Address 7274 Gayola Pl	1	Date of Receipt 1 2 2 3 2 0 0 8
City Saint Louis	State Zip Code MO 63143-2318	Transaction ID: 27635101 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.00
Name of Employer St. Louis Univ Hospital	Occupation Occupational Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
SUBTOTAL of Receipts This Page (option	nal)	168.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 39 / 50 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy As (AOTPAC)	ssociation,	Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Jeremy Joseph Rush			Date of Receipt
Mailing Address 1021 21st Street			12 23 7 2008
City	State	Zip Code	Transaction ID: 27635102
Portsmouth	OH	45662-2809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer HCR Manor Care	Occupation Occupation	n onal Therapist	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	1
Other (specify) ▼		275.00	
Full Name (Last, First, Middle Initial) Victoria Julia Schindler			Date of Receipt
Mailing Address 819 Berrywood Ln			12 23 7 2008
City		Zip Code	Transaction ID: 27635103
Galloway	NJ	08205-4201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		31.00
Name of Employer Richard Stockton College	Occupation Occupation	n onal Therapist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		245.00	
Full Name (Last, First, Middle Initial) Trina Lea Schulz			Date of Receipt
Mailing Address 4915 Noble			12 23 2008
City	State	Zip Code	Transaction ID: 27635104
Shawnee	KS	66226-9797	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Univ of Kansas Hospital	Occupation Occupation	onal Therapist	
Receipt For: Primary General	-	Year-to-Date ▼ 406.00	1
Other (specify) ▼	0 0	400.00	
SUBTOTAL of Receipts This Page (optional)			93.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 50 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
	The American Occupational Therapy A (AOTPAC)	Association,	Inc. Political Action Commit	tee
Α.	Full Name (Last, First, Middle Initial) Barbara A Seguine Mailing Address 1608 Waterford Dr			Date of Receipt
	City	State	Zip Code	12 23 2008
	Bowling Green	OH	43402-1567	Transaction ID: 27635105 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
	Name of Employer Owens Community College	Occupation	on ional Therapy Assistant	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 245.00	
- 3.	Full Name (Last, First, Middle Initial) Miss Katherine Shaffer			Date of Receipt
	Mailing Address 2243 Valencia Dr			12 23 2008
	City	State	Zip Code	Transaction ID: 27635108
	Sarasota	FL	34239-5310	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
	Name of Employer N/A	Occupation Student	on of Occupational Therapy	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 214.00]
-).	Full Name (Last, First, Middle Initial) Ms. Danielle Sue Shuttleworth			Date of Receipt
	Mailing Address 722a Copeland St			12 23 7 2008
	City Pittsburgh	State PA	Zip Code 15232-2224	Transaction ID: 27635109 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10202-2224	31.00
	Name of Employer N/A	Occupation Student	on of Occupational Therapy	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 275.00	
	SUBTOTAL of Receipts This Page (optional)			93.00
Ī	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 50 (check only one) X 11a
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	The American Occupational Therapy A (AOTPAC)	Association,	Inc. Political Action Commit	tee
۸.	Full Name (Last, First, Middle Initial) Stephanie Singleton			Date of Receipt
	Mailing Address 2917 Santa Monica Se		7's Oads	12 23 2008
	City Albuquerque	State NM	Zip Code 87106-2962	Transaction ID: 27635110 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		31.00
	Name of Employer Presbyterian Home Health	Occupatio Occupati	n ional Therapist	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 345.00	
	Full Name (Last, First, Middle Initial) Linda Coogle Stephens Mailing Address 2361 Fairoaks Rd			Date of Receipt
				12 23 2008
	City Decatur	State GA	Zip Code 30033-1207	Transaction ID: 27635112 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		31.00
	Name of Employer Retired	Occupatio Occupati	n ional Therapist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 366.00	
<u> </u>	Full Name (Last, First, Middle Initial) Denise Marie Miller	l		Date of Receipt
	Mailing Address 12 Faircliff Ct			12 23 YYYY 12 23 2008
	City	State	Zip Code	Transaction ID: 27635113
	Glendale FEC ID number of contributing federal political committee.	CA	91206-1723	Amount of Each Receipt this Period 100.00
	Name of Employer GAMC Therapy and Wellness Center	Occupatio Occupat	n ional Therapist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			162.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 42 / 50 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy A (AOTPAC)	ssociation,	Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Jacqueline Rose Webel			Date of Receipt
Mailing Address Apt 3w 6823 Kingsbury Blvd			12 23 2008
City	State	Zip Code	Transaction ID: 27635114
Saint Louis	MO	63130-4637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer N/A	Occupation STUDEN	n T of Occupational Therapy	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) Kathleen M Weissberg			Date of Receipt
Mailing Address 115 Beaufort Lane			12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 27635115
Milford	DE	19963-3780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Endura Care Therapy Mgmt	Occupation Occupati	n onal Therapist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	366.00]
Full Name (Last, First, Middle Initial) Grace Lee Williams			Date of Receipt
Mailing Address 2355 N Vermont St			12 DD / YYYYY 12 23 2008
City	State	Zip Code	Transaction ID: 27635116
Arlington	VA	22207-4052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer Arlington County Public Schools	Occupation Occupati	n onal Therapist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	
SUBTOTAL of Receipts This Page (optional)			93.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 50 (check only one) X 11a
or for commercial purposes, ot NAME OF COMMITTEE (I	her than using the name and n Full)	I address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
The American Occupat (AOTPAC)	ional Therapy Association	on, Inc. Political Action Commit	ttee
Full Name (Last, First, Midd Judith Lee Reedy Mailing Address 6759 R			Date of Receipt
			12 23 2008
City Redding	State CA	e Zip Code 96002-9723	Transaction ID: 27779434 Amount of Each Receipt this Period
FEC ID number of contributed rederal political committee.			10.00
Name of Employer Redding MTU	Occup Occup	pation pational Therapist	
Receipt For: Primary Ger Other (specify) ▼		gate Year-to-Date ▼ 205.00	
Full Name (Last, First, Midd Elizabeth W Gray-Nix			Date of Receipt
Mailing Address 90 Pelh	12 31 2008		
City	State	'	Transaction ID: 27779967
Sudbury FEC ID number of contributederal political committee.	ting C	01776-3132	Amount of Each Receipt this Period
Name of Employer Self Employed Occupationa Therapist	Occup Occup	ation pational Therapist	
Receipt For: Primary Ger Other (specify) ▼	neral Aggree	gate Year-to-Date ▼ 249.00	
Full Name (Last, First, Midd Rebecca E Argabrite Grove	l le Initial)		Date of Receipt
Mailing Address 41718	Browns Farm Lane		12 31 2008
City	State	e Zip Code	Transaction ID: 27779969
Leesburg	VA	20176-6026	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		31.00
Name of Employer Loudoun County Public Sci ools	Toccup	pational Therapist	
Receipt For: Primary Ger Other (specify) ▼	Aggre	gate Year-to-Date ▼ 471.00	
SUBTOTAL of Receipts This			141.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St.	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 50 (check only one) X
A.	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The American Occupational Therapy A (AOTPAC) Full Name (Last, First, Middle Initial) Juliann Thomas Mailing Address 4464 Meadow Creek Ct	association,		
	Toledo FEC ID number of contributing federal political committee.	ОН	43614-1915	Amount of Each Receipt this Period 150.00
	Name of Employer Univ of Toledo Receipt For: Primary General Other (specify) ▼		n onal Therapist Year-to-Date ▼	
В.	Full Name (Last, First, Middle Initial) Susan K Goszewski Mailing Address 225 Oregon Rd City Cheshire FEC ID number of contributing federal political committee. Name of Employer Yale New Haven Hosp	State CT C Occupation	Zip Code 06410-1827	Date of Receipt M M M
	Receipt For: Primary General Other (specify) ▼	<u> </u>	Year-to-Date ▼ 365.00	
С. 	Full Name (Last, First, Middle Initial) Janet Elizabeth Stafford Mailing Address 67 Hackett Hill Rd City Manchester FEC ID number of contributing federal political committee. Name of Employer DBA Kidz Play Pediatric Therapy and We Receipt For: Primary General Other (specify)		Zip Code 03102-8991 n onal Therapist Year-to-Date ▼ 304.20	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			210.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 / 50
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association,	Inc. Political Action Commit	tee
Full Name (Last, First, Middle Initial) Kathryn Melin Eberhardt			Date of Receipt
Mailing Address 142 North Rebecca S	Street		12 31 2008
City	State	Zip Code	Transaction ID: 27863492
Glenwood	IL	60425-1408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.00
Name of Employer South Suburban College	Occupation Occupation	n onal Therapy Assistant	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 245.00	

SUBTOTAL of Receipts This Page (optional)	•	31.00
TOTAL This Period (last page this line number only)	<u> </u>	6750.43

	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 46 / 50 (check only one)			
	ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 17			
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements mag name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)	NAME OF COMMITTEE (In Full)					
	The American Occupational Therapy As (AOTPAC)	ssociation,	Inc. Political Action Committee	tee			
Α.	Full Name (Last, First, Middle Initial) SunTrust Bank			Date of Receipt			
	Mailing Address PO Box 622227			11 28 7 2008			
	City	State	Zip Code	Transaction ID: 27468338			
	Orlando	FL	32862-2227	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		19.77			
	Name of Employer	Occupatio	on				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1491.99	interest earned on account			
В.	Full Name (Last, First, Middle Initial) SunTrust Bank			Date of Receipt			
	Mailing Address PO Box 622227			1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: 27982565			
	Orlando	FL	32862-2227	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		17.34			
	Name of Employer	Occupatio	on				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1509.33	Interest Received on Acco-			
	- Caron (opcony) -			******			

SUBTOTAL of Receipts This Page (optional)	•	37.11
TOTAL This Period (last page this line number only)	•	37.11

SCHEDULE B (FEC Form 3X)	Use separate schedule(FOR LINE N	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23 24 25
A In factor of the control of th	Note the second second second	27	28a 28b 28c X 29
Any Information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
The American Occupational Therapy (AOTPAC)	Association, Inc. Political Ad	ction Committee	
Full Name (Last, First, Middle Initial)			Transaction ID: 27627521
Council for a Livable World			Date of Disbursement
Mailing Address 322 4th Street, NE			$\begin{bmatrix} 1 & 2 & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 1 & 8 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 1 & 2 & 0 & 0 \\ 0 & 1 & 0 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Washington Purpose of Disbursement	DC 20002	T	1000.00
Tickets to Inaugural Brunch		011	
Candidate Name		Category/	
Office Sought: House Dis	bursement For:	Туре	
Senate	Primary General		Tickets to Inaugural Brun- ch
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Michigan Inaugural Dinner Dance		Transaction ID: 27627662 Date of Disbursement	
		12 18 2008	
Mailing Address c/o Hayes & Associa 1320 Old Chain Brid		12 18 2008	
City McLean	State Zip Code VA 22101		Amount of Each Disbursement this Perio
Purpose of Disbursement			5000.00
Tickets/Sponsor Inaugural Dinner Dance		011	
Candidate Name		Category/ Type	
Office Sought: House Dis	bursement For:	1	Tickets/Sponsor Inaugural
Senate	Primary General		Tickets/Sponsor Inaugural Dinner Dance
State: President District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 27633722
American Association of Nurse Anest	hetists		Date of Disbursement
Mailing Address 25 Massachusetts A	ve., NW Suite 55		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{smallmatrix} $
City	State Zip Code		Amount of Each Disbursement this Period
Washington Purpose of Disbursement	DC 20001		8000.00
Tickets for Inaugural Viewing Party		011	333300
Candidate Name	Category/ Type		
	bursement For:	•	Tickets for Inaugural Vie-
Senate President	Primary General		wing Party
State: District:	Other (specify)		
SUBTOTAL of Disbursements This Page (opti	onal))	14000.00
TOTAL This Period (last nage this line number	· only)		14000.00

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District:

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	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 48 / 50
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 X 28a 28b 28c 29 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name			
\rangle	NAME OF COMMITTEE (In Full) The American Occupational Therapy Associ(AOTPAC)	ciation, Inc. Political Acti	on Committee	e
	Full Name (Last, First, Middle Initial) Susan Smith-Foley			Transaction ID: 27632949 Date of Disbursement
	Mailing Address 400 Woodland Ave City 5	State Zip Code		Amount of Each Disbursement this Period
	,	NJ 07717-1141	010	-25.00
	Candidate Name Office Sought: House Disburse	ment For:	Category/ Type	W
	Senate President State: District:	Primary General Other (specify) ▼		Void - Avon Occupational Therapy, Inc.
	Full Name (Last, First, Middle Initial) Susan Smith-Foley			Transaction ID: 27632950 Date of Disbursement
	Mailing Address 400 Woodland Ave			$\begin{bmatrix} M & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
		State Zip Code NJ 07717-1141		Amount of Each Disbursement this Period
	Purpose of Disbursement Original Refund Never Cashed - Reissue of that re Candidate Name	fund	010 Category/	25.00
		ment For:	Type	
	Office Sought: House Disburse Senate President	Primary General Other (specify)		Original Refund Never Cashed - Reissue of that refund

SUBTOTAL of Disbursements This Page (optional)	•				 0.00	
	_				 0.00	,
TOTAL This Period (last page this line number only)			_	_	 0.00	,

State:

В.

District: 05

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	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 49 / 50										
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b										
An or f	y Information copied from such Reports and Statemetor commercial purposes, other than using the name	by any person f committee to so	or the purpose of soliciting contributions licit contributions from such committee											
\rangle	NAME OF COMMITTEE (In Full) The American Occupational Therapy Assoc (AOTPAC)	ciation, Inc. Political Act	ion Committee	e										
	Full Name (Last, First, Middle Initial) Lampson For Congress			Transaction ID: 27633112 Date of Disbursement										
	Mailing Address P.O. Box 58606			$\begin{bmatrix} M & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 2 & 2 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$										
	,	State Zip Code TX 77258		Amount of Each Disbursement this Period										
	Purpose of Disbursement Void - Lampson For Congress-Check was Never C	ashed	011	-1000.00										
	Candidate Name Mr. Nicholas Lampson		Category/ Type											
	Office Sought: X House Disburser Senate President State: TX District: 22	ment For: 2008 Primary X General Other (specify)		Void - Lampson For Congress-Check was Never Cashed										
	Full Name (Last, First, Middle Initial) Friends Of Glenn Thompson			Transaction ID: 27812649 Date of Disbursement										
	Mailing Address 198 Park Road			$\begin{bmatrix} M & M \\ 1 & 2 & M \end{bmatrix} / \begin{bmatrix} D & 3 & 1 \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}^{Y}$										
		State Zip Code PA 16841		Amount of Each Disbursement this Period										
	Purpose of Disbursement Void - Friends Of Glenn Thompson-check lost and	never cashed	011	-1000.00										
	Candidate Name Mr. Glenn Thompson		Category/ Type											
	Office Sought: X House Disburser Senate President	ment For: 2008 Primary X General Other (specify)		Void - Friends Of Glenn Thompson-check lost and never cashed										

SUBTOTAL of Disbursements This Page (optional)	•	-2000.00
TOTAL This Period (lest nego this line number only)	_	-2000.00
TOTAL This Period (last page this line number only)		-2000.00

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	CHEDULE B (FEC Form 3)	' Use separate schedule(s)					R:			PA	50		
H	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b 27	Ĥ	22 28a	ш.	23 28b		24 28c	25 29		26 30b
	y Information copied from such Reports and for commercial purposes, other than using												
\	NAME OF COMMITTEE (In Full)												
\backslash	The American Occupational Therap (AOTPAC)	y Association, Inc. Political Actio	n Co	mmitte	ee								
	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address PO Box 622227					Trans Date of		burse			0 ŏ 8	Y	
	City Orlando Purpose of Disbursement	State Zip Code FL 32862-2227	U	-		Amou	nt of	Each	Dis	burse	t this F		od
	bank fees on account Candidate Name		O0 Cateo	gory/									
	Office Sought: House Senate President	Disbursement For: Primary General Other (specify)				bank t	fees	on a	CCC	ount			

SUBTOTAL of Disbursements This Page (optional)	•	280.04
TOTAL This Period (last page this line number only)	•	280.04